

TITLE 59: MENTAL HEALTH
CHAPTER IV: DEPARTMENT OF HUMAN SERVICES

PART 132
MEDICAID COMMUNITY MENTAL HEALTH SERVICES PROGRAM

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AUTHORITY: Implementing and authorized by the Community Services Act [405 ILCS 30] and Section 15.3 of the Mental Health and Developmental Disabilities Administrative Act [20 ILCS 1705].

SOURCE: Emergency rules adopted at 16 Ill. Reg. 211, effective December 31, 1991, for a maximum of 150 days; new rules adopted at 16 Ill. Reg. 9006, effective May 29, 1992; amended at 18 Ill. Reg. 15593, effective October 5, 1994; emergency amendment at 19 Ill. Reg. 9200, effective July 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 16178, effective November 28, 1995; amended at 21 Ill. Reg. 8292, effective June 25, 1997; recodified from the Department of Mental Health and Developmental Disabilities to the Department of Human Services at 21 Ill. Reg. 9321; amended at 22 Ill. Reg. 21870, effective December 1, 1998; emergency amendment at 23 Ill. Reg. 4497, effective April 1, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 10205, effective August 23, 1999; amended at 24 Ill. Reg. 17737, effective November 27, 2000; amended at 26 Ill. Reg. 13213, effective August 20, 2002; amended at 28 Ill. Reg. 11723, effective August 1, 2004; amended at 31 Ill. Reg. 9097, effective July 1, 2007; emergency amendments at 31 Ill. Reg. 10159, effective July 1, 2007, for a maximum of 150 days; amended at 31 Ill. Reg. 15805, effective November 8, 2007; amended at 32 Ill. Reg. 9981, effective July 1, 2008; emergency amendment at 35 Ill. Reg. 1128, effective January 1, 2011, for a maximum of 150 days; emergency amendment repealed by emergency rulemaking at 35 Ill. Reg. 7719, effective April 28, 2011; amended at 35 Ill. Reg. 8860, effective May 26, 2011; amended at 36 Ill. Reg. 18582, effective December 13, 2012; amended at 38 Ill. Reg. 15550, effective July 1, 2014; amended at 39 Ill. Reg. 13684, effective October 1, 2015; former Part repealed at 43 Ill. Reg. 1046, and new Part adopted at 43 Ill. Reg. 1049, effective January 1, 2019; emergency amendment at 45 Ill. Reg. 11877, effective September 16, 2021, for a maximum of 150 days; amended at 46 Ill. Reg. 2937, effective February 4, 2022; emergency amendment at 47 Ill. Reg. 12785, effective August 11, 2023, for a maximum of 150 days; amended at 47 Ill. Reg. _____, effective _____.

SUBPART A: GENERAL PROVISIONS

Section 132.5 COVID-19 Vaccination of Entity Staff (Repealed)

- a) ~~For the purposes of this Section,~~
 - 1) ~~"Entity" means any entity certified as a Certified Specialty Provider (CSP) or Certified Comprehensive Community Mental Health Center (CMHC) under this Part.~~
 - 2) ~~"Staff" or "staff person" means any person who:~~
 - A) ~~is employed by, volunteers for, interns for, may be an unpaid personnel, or other individual who are agents of the CSP or CMHC, or individuals who are contracted to provide services for a Certified Specialty Provider (CSP) or Certified Comprehensive Community Mental Health Center (CMHC), or an individual who is contracted, either directly or through an employing organization, to provide services to an entity; and~~
 - B) ~~is in close contact (fewer than 6 feet) with other persons in the entity for more than 15 minutes at least once a week on a regular basis as determined by the entity. The term "staff" or "staff person" does not include any person who is present at the entity for only a short period of time and whose moments of close physical proximity to others on site are fleeting (e.g., contractors making deliveries to a site where they remain physically distanced from others or briefly entering a site to pick up a shipment).~~
 - 3) ~~"COVID-19 vaccine" means a vaccine for COVID-19 that has been authorized for emergency use, licensed, or otherwise approved by the U.S. Food and Drug Administration (FDA)~~
 - 4) ~~An individual is "fully vaccinated against COVID-19" two weeks after receiving the second dose in a two-dose series of a COVID-19 vaccine, or two weeks after receiving a single-dose COVID-19 vaccine.~~
- b) ~~Each entity shall require all staff to be fully vaccinated against COVID-19 or be tested in a manner consistent with the requirements of subsection (c):~~
 - 1) ~~Each entity shall require staff who are not fully vaccinated against COVID-19 to have, at a minimum, the first dose of a two-dose vaccination~~

~~series or a single dose vaccination by September 19, 2021, and if applicable, the second dose of a two-dose COVID-19 vaccine series within 30 days following administration of their first dose, or be tested consistent with the requirements of subsection (c).~~

~~2) Each entity shall require staff who are fully vaccinated against COVID-19 to submit proof of full vaccination against COVID-19. Proof of vaccination may be met by providing to the entity one of the following:~~

~~A) a Centers for Disease Control and Prevention (CDC) COVID-19 vaccination record card or photo of the card;~~

~~B) documentation of vaccination from a health care provider or electronic health record; or~~

~~C) state immunization records.~~

~~3) Each entity shall make available opportunities for staff to be fully vaccinated against COVID-19, either directly at the entity or indirectly, such as through an arrangement with a pharmacy partner, local health department, or other appropriate health entity.~~

~~4) Each entity shall exempt individual staff members from the requirement that all staff be fully vaccinated against COVID-19 if:~~

~~A) vaccination is medically contraindicated, including any individual staff member who is entitled to an accommodation under the Americans with Disabilities Act (42 U.S.C. 12101) or any other law applicable to a disability-related reasonable accommodation; or:~~

~~B) vaccination would require the individual staff member to violate or forgo a sincerely held religious belief, practice, or observance.~~

~~5) Staff that fall within the exemptions of subsection (b)(4) shall undergo the testing requirements set forth in subsection (c).~~

~~6) Entities may adopt more stringent policies requiring all staff to be vaccinated. Nothing in this Section supersedes or modifies the date such policies are designated by the entity to take effect.~~

~~e) By September 19, 2021, each entity shall require its staff who are not fully vaccinated against COVID-19 to undergo testing for COVID-19, weekly, at a~~

minimum. If staff who are not fully vaccinated against COVID-19 are not tested as required by this subsection, the staff shall not be permitted to enter or work at the entity.

- 1) ~~The COVID-19 test must either have Emergency Use Authorization by the FDA or be operated pursuant to the Laboratory Developed Test requirements by the U.S. Centers for Medicare and Medicaid Services.~~
 - 2) ~~Such testing must be conducted on-site at the entity or the entity must obtain proof or confirmation from the staff person of the negative test result obtained elsewhere.~~
 - 3) ~~Each entity shall make COVID-19 tests available to its staff consistent with the requirements of this Section, or consistent with any more stringent requirements for testing adopted by the entity.~~
 - 4) ~~If a staff person tests positive for COVID-19, the entity shall exclude the staff person from the entity, consistent with federal, State, and local health guidance, recommendations, and regulations.~~
 - 5) ~~Staff who are not fully vaccinated may be permitted to enter or work at the entity while they are waiting to receive the results of their weekly test.~~
- d) ~~Each entity shall post conspicuous signage throughout the entity, including at points of entry and exit and each hallway, notifying staff that the entity makes available opportunities for staff to be fully vaccinated against COVID-19. The signs shall be on 8.5 by 11-inch white paper, with text in Calibri (body) font and 26-point type in black letters.~~
- e) ~~Each entity shall maintain a record of fully vaccinated staff, unvaccinated staff, and weekly testing. The record shall include a weekly count of how many staff are fully vaccinated; how many are not fully vaccinated; and how many (vaccinated or unvaccinated) have tested positive for COVID-19.~~
- f) ~~The entity shall maintain documentation in each staff person's confidential medical file, in accordance with federal and state privacy laws, regarding COVID-19 vaccinations and tests, including the following:~~
- 1) ~~Proof of vaccination for the staff person; or~~
 - 2) ~~Written declination of the vaccination if offered by the entity; and~~
 - 3) ~~The results of any COVID-19 tests for the staff person.~~

- ~~g) Each entity shall verify that staff have been provided education on the benefits and potential risks associated with the COVID-19 vaccine.~~
- ~~h) Nothing in this Section prohibits any entity from implementing vaccination or testing requirements for staff, clients, and visitors that exceed the requirements of this Section.~~

(Source: Repealed at 47 Ill. Reg. _____, effective _____)